

INSTRUCTIONS

MEAL PARTICIPATION RECORD

The purpose of the <u>Meal Participation Record</u> Form is to document the total number of meals served to enrolled participants during the month. You will use the <u>Meal Participation Record</u> along with the <u>Monthly Attendance Record/Income Eligibility Form</u> to fill out your <u>Claim for Reimbursement</u> each month. The <u>Meal Participation Record</u> provides the total number of meals and/or snacks you are claiming which are served in the month. The <u>Monthly Attendance Record/Income Eligibility Form</u> provides the enrollment figures for "Free", "Reduced" and "Paid" categories each month. These two sets of figures are needed to fill out the monthly <u>Claim for Reimbursement</u>, which you submit to the state office.

- 1. Each day enter the actual attendance at your center. (Column 1)
- 2. The number of breakfasts, lunches and/or suppers, and snacks are obtained by counting the number of participants receiving each meal or snack. These figures are entered daily under the corresponding day on the Meal Participation Record under "Meals Claimed for Reimbursement". (Column 2)
 - Often the meal count is recorded on the Menu Plan and Food Production Record. If you are using this form, transfer the meal count (the number in the served/actual/child) daily onto the Meal Participation Record.
- 3. To help you keep track of total meals served and food costs, it is recommended that you also record the number of non-enrolled participants eating meals, which would include staff that eat meals. This can be recorded on the Meal Participation Record under "Meals Not Reimbursable". (Column 3) The "Meals Not Reimbursable" totals are not included on the Claim for Reimbursement.

Expect that the number of breakfasts, lunches/suppers, and snacks will vary from day to day depending on attendance, school children, drop-ins, etc.

Use one Meal Participation Record each month. At the end of the month, total each column under "Meals Claimed for Reimbursement". These are the figures you will use when submitting the Claim for Reimbursement form each month.

Do NOT send the original Meal Participation Record into the state office. This information must remain with your records for three years beyond the current year.

Sample Form

MEAL PARTICIPATION RECORD CENTER

MONTH

| OLIVIER | | | | | | | | | | | |
|-----------------|---------------------|------------------------------------|-------------|-------|-------------|--------|---|-------------|-------|-------------|--------|
| DAY OF MONTH | DAILY ATTENDANCE | MEALS CLAIMED FOR REIMBURSEMENT | | | | | MEALS NOT REIMBURSABLE To participants not enrolled | | | | |
| | 1 | 2 | | | | | 3 | | | | |
| | | Break- fast | AM Snack | Lunch | PM Snack | Supper | Break- fast | AM Snack | Lunch | PM Snack | Supper |
| 1 | 24 | 17 | | 17 | 23 | | 1 | | 1 | | |
| 2 | 19 | 19 | | 19 | 19 | | | | | 3 | |
| 3 | 25 | 19 | | 17 | 22 | | 3 | | 3 | | |
| 4 | 19 | 19 | | 19 | 18 | | | | | | |
| 5 | 24 | 15 | | 18 | 23 | | 1 | | | 1 | |
| 6 | 19 | 18 | | 18 | 19 | | | | 2 | 1 | |
| TOTAL | 149 | 123 | | 126 | 143 | | 5 | | 6 | 5 | |